

Faculty Members' Ratings of the Effectiveness of Academic Strategies for University Students with Psychiatric Disabilities

Karin F. Brockelman, Ph.D.
University of Medicine & Dentistry of New Jersey

Abstract

University faculty members were surveyed regarding which academic strategies they used to accommodate students living with psychiatric disabilities and the effectiveness of these strategies. Differences were found between Engineering and faculty in fields other than science, technology, engineering, and math (non-STEM) with regard to the academic strategies they use to accommodate students living with psychiatric disabilities; five of the strategies were used more frequently by Engineering faculty than non-STEM faculty and four of the strategies were used more frequently by non-STEM faculty. One strategy, providing extra time on an exam, was rated as significantly more effective by Engineering faculty than non-STEM faculty.

Barriers to higher education for individuals living with psychiatric disabilities have been examined and identified. Such barriers include symptoms of mental illness (e.g. depression, anxiety, poor concentration), side effects of medications (e.g. fatigue, dry mouth requiring the student to bring liquids to class), and perceptions of faculty and peers (e.g. the disability is not visible so it does not exist, people who have mental illnesses are dangerous and should not be on college campuses) (Collins & Mowbray, 2005; Megivern, Pelerito, & Mowbray, 2003; Rickerson, Sourma, & Burgstahler, 2004; Sharpe, Bruinininks, Blacklock, Benson, & Johnson, 2004; Weiner & Weiner, 1996). Many of these barriers are ameliorated with effective support strategies and/or accommodations. The reasonableness and effectiveness of an accommodation in the workplace depends on many factors; the reasonableness and effectiveness of academic strategies and accommodations logically depend on many factors as well. As we seek to identify strategies and accommodations that are effective for postsecondary students living with psychiatric disabilities, it is important to explore differences in the effectiveness of an accommodation between different academic settings or disciplines.

Bourke, Strehorn and Silver (2000) surveyed faculty at one university regarding the provision of instructional accommodations to students with learning disabilities. An important finding of this study was

that faculty beliefs in the importance of and efficacy of accommodations were positively related to provision of accommodations to students. Perceiving that university disability services were providing a lot of support to students with disabilities was positively related to belief in the importance and efficacy of accommodations. Additionally, faculty who perceived their own departments as supporting them with resources were more likely to provide accommodations to students with learning disabilities. One key difference between departments was that non-STEM faculty reported that it was easier to provide an alternate form of an exam than STEM faculty.

Vasek (2005) surveyed faculty at a 4-year college to assess their willingness to provide accommodations to students with all types of disabilities, including mobility, sensory, cognitive, and psychiatric disabilities. Vasek (2005) reported one significant difference between disciplines; Education faculty and Natural Sciences faculty were the most willing to accommodate students and Business faculty were least willing. The author reported that a large percentage of the participants were highly unwilling to allow certain accommodations, especially extended time on exams.

Szymanski, Hewitt, Watson, and Swett (1999) conducted a similar study in the late 1990s. These researchers found that 16% of faculty in any field never dealt with strategies for students with disabilities. Faculty reported that they wanted to accommodate

students but relied on the disability services office to tell them what to do, especially with regard to students with hidden disabilities.

Becker, Martin, Wajeeth, Ward, and Shern (2002) indicated that faculty commonly used accommodations including extending deadlines and giving extra time on exams. Vasek (2005) reported similarly that the accommodations faculty provided most often for students with any disability were: (a) allowing extended time on exams, (b) making general exam accommodations, and (c) allowing extra time to complete assignments.

Becker et al. (2002) reported that the younger a faculty member was, the more likely he or she was to consult the counseling center about a student. Faculty who consulted the counseling center were more likely to refer their students for services. Discomfort and fear of working with students who have mental illnesses were associated with making fewer accommodations and referrals. Greater confidence in one's ability to help students was associated with use of more accommodations and referrals. Scales measuring faculty perceptions of their ability to help, and fear of students with mental illnesses were inversely related. Additionally, faculty in health sciences made fewer accommodations and referrals than faculty in other disciplines.

GlenMaye and Bolin (2007) surveyed social work baccalaureate program directors in one state regarding accommodation of students with psychiatric disabilities in their programs. The authors found a positive correlation between the number of accommodations used by faculty and their ratings of the effectiveness of the accommodations. There was a positive correlation between effectiveness ratings and perceptions of the employability of students living with a psychiatric disability in the field of social work. Feeling knowledgeable about psychiatric disability was also positively correlated with the faculty effectiveness ratings of accommodations. The most frequently used accommodations were in exam taking, adjustments to the length of time in which one is required to complete the program, and adjustment in course assignments.

Perceptions of one's resources and support as a professor to work with students with psychiatric disabilities is one factor that consistently appears in the literature on accommodations and academic strategies for working with college students with disabilities. Experiences of faculty regarding the effectiveness of specific strategies and accommodations can provide valuable information as we seek to determine the ef-

ficacy of these strategies in different circumstances. If provision of accommodations by faculty is associated to faculty beliefs in the importance of and efficacy of accommodations, then research is needed in order to establish an empirical basis for such beliefs.

Purpose

Accommodations are individualized and need to be appropriate to the situation. Different types of assignments and assessments are required of students in different types of courses. A foreign language course is likely to include oral examinations or presentations as an important component of the assessment of students' mastery of the language. A copy of a peer's class notes may be more useful than a recording of the lecture when the math professor writes many examples on the board in class. In a drawing course, more time to complete an assignment may be helpful while a copy of a peer's notes from class are not necessary.

The purpose of this study was to examine the perspectives of faculty members regarding the effectiveness of specific accommodations. The perspectives of STEM and non-STEM faculty were compared with the assumption that the ways in which students' knowledge is assessed differs between STEM and non-STEM fields. The research questions addressed in this paper were:

- a. What strategies have faculty employed to support students with psychiatric disabilities, and how effective were those strategies?
- b. Do STEM faculty use different strategies than faculty in non-STEM fields?
- c. Do STEM and non-STEM faculty rate the effectiveness of strategies differently?

Methods

Participants and Setting

All faculty. Participants were 107 full-time faculty members at a large Midwestern university who held tenure-line positions. Sixty-two percent were male. The racial and ethnic breakdown of the respondents was as follows: 89% Caucasian, 6% Asian, 3% Latino, 1% African American, and 1% from other backgrounds. Most of the faculty, 68%, taught both graduate and undergraduate students. Twenty percent primarily taught graduate students, and 10% instructed only undergrads.

STEM and non-STEM faculty. Faculty were asked to report their college rather than departmental affiliation. Several colleges within the university included STEM and non-STEM departments. For example, the college of Liberal Arts and Sciences included departments such as East Asian Languages and Cultures as well as Physics and Biology. Comparisons were made between engineering faculty and those from colleges that did not include any STEM departments; these two groups comprised a subset of the total participants with an $n=50$. The college affiliations of the survey participants are listed in Table 1; participants listed in the STEM and non-STEM columns of this table constitute the subset of 50 whose data were included in the comparison analyses. Two colleges, Engineering and Veterinary Medicine, had only STEM departments. All 27 STEM faculty participants were in the college of Engineering; no faculty in Veterinary Medicine participated in the survey. The non-STEM faculty reported the following college affiliations: 9 in Education, 9 in Fine & Applied Arts, and 5 in Communications.

Engineering faculty held their positions for a mean of 16.00 years and a SD of 10.73 years; their mean age was 48.44 years with a SD of 11.11 years. Faculty in non-STEM fields had been working full-time in tenure line positions for a mean of 14.68 years with a SD of 9.77 years; their mean age was 48.39 years with a SD of 9.60 years. The non-STEM faculty were divided nearly evenly between men and women while more than 77% of the engineering faculty were men. The percentages of the engineering and non-STEM faculty who reported a race or ethnicity other than Caucasian were 19% and 4 % respectively.

Instrument

Questionnaire. The questionnaire was comprised of 5 sections. It was adapted from the Mental Health and Illness Awareness Survey (MHIA) developed by Becker et al. (2002). Sections I and II pertained to faculty members' comfort and confidence in working with students with psychiatric disabilities as well as the types of personal and professional experience they had with these students.

Section III asked about faculty use of strategies for students with psychiatric disabilities and their perceptions of the effectiveness of these strategies. First, participants were asked which strategies they used. If they used the strategy, participants were then asked to

rate its effectiveness. A 3-point scale from "very effective" (2), "effective" (1), to "not effective" (0) was used for responses.

Pilot. A pilot questionnaire was sent to five faculty members at the university. All completed the questionnaire in less than 12 minutes and reported that that format was user-friendly. Several revisions were made to Section III based on feedback from the pilot participants. An additional sentence was added to the instructions on Section III stating, "You may have used these strategies to accommodate students with other disabilities, but we would like you to focus only on your experiences with students with psychiatric disabilities when responding." A column for an "N/A" option was added. Lastly, the following strategy was included, "allowed a student to miss a class because of a problem related to his/her disability."

Procedures

Questionnaires and consent letters were sent to 561 faculty at a large Midwestern university via campus mail. A self-addressed sticker was enclosed. Three weeks after the first mailing, the questionnaire was sent a second time to faculty members who had not yet responded. Participants voluntarily self-selected to be in the study by completing and returning the questionnaire.

In order to ensure a large enough number of faculty who knew that they taught students with psychiatric disabilities, the disability services office was contacted. The three colleges suggested by disability services were Engineering, Business, and Veterinary Medicine because many students who identified as living with psychiatric disabilities were majoring in these fields. Oversampling the targeted academic units was expected to increase the probability of finding faculty participants who knew they taught students with psychiatric disabilities.

From alphabetical listings of faculty in each college, every third person was selected. The colleges of Engineering, Business, and Veterinary Medicine were over-sampled by selecting every tenth person remaining on the list. A total of 115 questionnaires were returned from the 561, yielding a response rate of 20.5%, which is within the typical range of 10-50% for mail questionnaires (Weisberg, Krosnick, & Bowen, 1996). Of the 115 returned questionnaires, 107 were included in the analyses. A minimum of 46 items were completed out of 58 on the questionnaires.

Table 1

College Affiliations of Participants

	Surveys Completed	STEM Departments Only	Non-STEM Departments Only	Colleges with Both
ACES	3			3
Applied Life Studies	6			6
College of Education	9		9	
Communications	5		5	
Engineering	27	27		
Fine & Applied Arts	9		9	
Liberal Arts & Sciences	48			48
Total	107	27	23	57

Note. No faculty members from the colleges of Business, Labor & Industrial Relations, Law, Social Work, or Veterinary Medicine returned completed surveys.

On the eight discarded questionnaires, four items or fewer were completed.

Although the non-response rate was not consistent across colleges, no apparent pattern emerged with regard to which colleges' faculty were likely to respond. The percentage of non-responders within a college ranged from 54% in Applied Life Sciences to 100% in the colleges of Law and Social Work. Communications had the second smallest percentage of non-responders with 55%, followed by Education with 72%.

Results

Sections I and II of the survey examined the relationship between sources of information about mental illness and perceptions of working with students with psychiatric disabilities among university faculty members. Information sources included professional training, mass media, personal relationships with individuals, former students, and one's own experience of psychiatric disability. Faculty who had a student or a friend with a psychiatric disability had more positive perceptions of working with students with psychiatric disabilities than faculty who did not have one of these experiences. Data from sections I and II were reported in a previous article (see Brockelman, Chadsey, & Loeb, 2006).

Strategies Used by All Faculty

Table 2 lists the descriptive statistics for the effectiveness ratings of the strategies in order of mean rating. Three sets of descriptive statistics are listed for (a) engineering faculty, (b) non-STEM faculty, and (c) the whole sample. The most widely used strategies were (a) *discussed the problem with the student* (58%), (b) *extended a deadline for a student* (56%), (c) *gave a student extra time to complete an exam* (50%), (d) *allowed a student to miss a class because of a problem related to his/her disability* (46%), and (e) *allowed a student to use a private testing room or test center* (39%). *Rearrangement of seating*, *planning of additional breaks*, and *use of an alternate test format* were all used by fewer than 9% of the participants. A definition of psychiatric disability was requested by 11 participants. Additionally, 10 or more participants wrote that their responses to 5 items depended on the specific psychiatric disability diagnosis.

Mean effectiveness ratings for each strategy, along with the standard deviation are included in Table 1. The rating scale ranged from a low of 0 to a high of 2.

The three strategies rated as most effective were: (a) *pre-arranged breaks in class* (in addition to what other students in the class would typically have) ($M = 1.67$), (b) *rearrange seating* ($M = 1.57$), and (c) *gave a student extra time to complete an exam* ($M = 1.45$). The three strategies rated as least effective were: (a) *allowed a student to miss a class because of a problem related to his/her disability* ($M = .78$), (b) *referred the student for professional help* ($M = .87$), and (c) *discussed the problem with the student* ($M = .88$). Of the fifteen strategies, nine had SDs greater than .7, and none were less than .5. Ten distributions were negatively skewed, indicating that evaluations of these strategies were generally positive. T-tests of faculty members' effectiveness ratings between men and women did not yield any statistically significant results.

Strategies Used by Engineering and Non-STEM Faculty

Fifty faculty members were included in the comparison analyses. Engineering faculty comprised 54% of the participants in the comparison analyses; also, 64% were men and 88% were Caucasian. The number of strategies that engineering faculty reported using ranged from 0 to 10 with a mean of 4.81 and a SD of 3.44. Non-STEM faculty reported using from 0 to 11 different strategies with a mean of 5.22 and SD of 3.57.

A greater percentage of engineering faculty than non-STEM faculty gave a student *extra time to complete an exam* (Engineering = 59%, non-STEM = 30%), *allowed a student to use a private testing room or test center* (Engineering = 44%, non-STEM = 26%), *permitted an exam to be read orally, dictated, scribed, or typed* (Engineering = 11%, non-STEM = 0%), *consulted with a professional regarding the student* (Engineering = 26%, non-STEM = 13%), or *discussed the problem with the student* (Engineering = 63%, non-STEM = 39%). A larger percentage of non-STEM faculty than engineering faculty *accepted alternative assignments* (non-STEM = 26%, Engineering = 7%), *allowed a student to tape lectures* (non-STEM = 26%, Engineering = 15%), *allowed a student to get a copy of another student's notes* (non-STEM = 26%, Engineering = 11%), or *allowed a student to miss a class because of a problem related to his/her disability* (non-STEM = 48%, Engineering = 33%).

Effectiveness of Strategies Used by Engineering and

Table 2

Descriptive Statistics for Strategy Effectiveness Ratings

Strategy	Engineering (n=27)			Non-STEM (n=23)			All (n=107)		
	n	M	SD	n	M	SD	%	M	SD
Pre-arranged breaks in class	1	2.00	.000	2	1.50	.707	3	1.67	.577
Rearranged seating	2	1.50	.707	2	2.00	0.00	7	1.57	.535
Gave a student extra time to complete an exam	16	1.69*	.479	7	1.00	.816	50	1.45	.653
Accepted alternative assignments	2	1.50	.707	6	1.33	.816	20	1.41	.795
Allowed a student to use a private testing room or test center	12	1.58	.515	6	1.17	.983	39	1.41	.715
Permitted an exam to be read orally, dictated, scribed or typed	3	1.00	1.000	0			15	1.36	.674
Extended a deadline for a student	16	1.56	.512	13	1.31	.63	56	1.33	.617
Allowed a student to tape lectures	4	1.75	.500	5	1.20	.837	29	1.19	.849
Consulted with the university counseling center, student health center, mental health department, or the disability services center about an issue	7	1.14	6.90	3	1.33	.577	26	1.18	.733
Permitted an alternative test format (essay vs. multiple choice)	0			1	1.00		8	1.00	.577
Allowed a student to get a copy of another student's notes or arrange for a note taker in your class	3	1.00	.000	6	1.17	.983	29	1.00	.722
Included a note on your syllabus asking students with all types of disabilities who may use accommodations to contact you	2	1.50	.707	0			16	1.00	.853
(any disability - not only psychiatric									
Discussed the problem with the student	17	.88	.697	9	.89	.928	58	.88	.765
Referred a student to professional help	14	1.00	.784	12	.83	.937	50	.87	.718
Allowed a student to miss a class because of a problem related to his/her disability	8	1.00	.926	11	.73	.786	46	.78	.787

* $p < .05$.

^a Faculty at the university were required to include a statement on their syllabi advising students who would need accommodations to contact the disability services office.
Note. STEM=Engineering. Non-STEM=Education, Communications, and Fine & Applied Arts. All=Agricultural Consumer & Economic Sciences, Applied Life Studies, Education, Communications, Engineering, Fine & Applied Arts, and Liberal Arts & Sciences.

Non-STEM Faculty

T-tests were performed to test the following hypothesis that engineering and non-STEM faculty did not differ in their ratings of the effectiveness of strategies. One strategy was rated as significantly more effective by engineering faculty than by non-STEM faculty; *providing extra time on an exam* had a mean effectiveness rating of 1.69, on a scale from 0-2, among the 16 engineering faculty who had used this strategy. The effect size for this comparison was large with $d = 1.112$. The 7 non-STEM faculty who accommodated a student with *extra time on an exam* gave this an average effectiveness rating of 1.0. No other effectiveness ratings were significantly different between engineering and non-STEM faculty.

There were several differences in effectiveness ratings that were not statistically significant but are worth noting because so little information has been published to date on this topic. Table 3 lists the results of the T-tests along with Cohen's d for each comparison with 9 or more individuals. *Extending a deadline*, *testing in private*, and *allowing a student to tape a lecture* were all rated more positively by engineering faculty than non-STEM faculty. The effect size for *testing in private* was moderate at $d = .599$ and for *allowing a student to tape a lecture* was large at $d = .870$. More than half of both the engineering and non-STEM faculty had *extended a deadline* for a student and found it to be effective.

Discussion

Strategies Used by All Faculty

Two of the three most commonly used strategies by all faculty were *extended a deadline for a student*, and *allowed a student extra time to complete an exam*. Both strategies received high effectiveness ratings from faculty. Becker et al. (2002), GlenMaye and Bolin (2007), and Vasek (2005) also found these accommodations to be frequently used by participants in their studies. Extra time to complete an assignment is a commonly requested accommodation by students, but extra time need not be open-ended. If the faculty member does not set a new deadline, the student can take the initiative to do so.

The strategy *discussed the problem with the student* was used by more faculty than any other, but was one of the three rated as least effective. GlenMaye and Bolin (2007) also reported discussing the issue with the student as the most widely used strategy, but they

did not report effectiveness ratings. A possible explanation for this finding is that it required initiation by the professor, while the *extended a deadline and extra time to complete an exam* would likely have been requested by the student. Students with psychiatric disabilities do not necessarily want their professors to know about their disability (Olney & Brockelman, 2003). Students may be concerned about the potential stigma associated with a psychiatric label, such as the assumption that students with psychiatric disabilities are less intelligent than other students (Cook et al., 1993). Commonly used student-initiated strategies were rated as highly effective (e.g. *extended a deadline and extra time to complete an exam*). Students who are proactive about requesting strategies may have better academic outcomes than students who choose not to discuss disability-related needs with their professors. Prior research has not made comparisons between student- and faculty-initiated strategies.

The strategy rated least effective was *allowed a student to miss a class due to a disability-related problem*. Although professors may not have penalized students, missing class means missing content, instruction, and discussion. The natural consequences of missing class may be what influence faculty perception that it was not effective. The high standard deviation for this strategy indicated that while some faculty found it to be totally ineffective, others gave it an effectiveness rating as high as the second most effective strategy on the questionnaire. *Allowed a student to miss a class due to a disability-related problem* has not been included in previous studies. A variety of factors may have affected faculty experiences with the adjustment of attendance policies including (a) how often an individual student missed class, (b) the student's resourcefulness in learning missed content, (c) the student's level of achievement in the course prior to missing a class, and (d) the severity and duration of the student's symptoms.

Strategies Used by Engineering and Non-STEM Faculty

Engineering and non-STEM faculty appeared to use different accommodations and strategies with differing frequencies. Engineering faculty made more exam-related accommodations while non-STEM faculty made more classroom accommodations. One reason for these findings may be that non-STEM disciplines may assign papers or projects more often than they give exams. This study did not ask faculty about the

Table 3

T-tests Between Engineering and Non-STEM Faculty Ratings of the Effectiveness of Strategies

Strategy	<i>t</i>	<i>df</i>	<i>d</i>
Gave a student extra time to complete an exam	-2.549*	21	1.112
Extended a deadline for a student	-1.202	27	.154
Allowed a student to use a private testing room or test center	-1.197	16	.599
Allowed a student to tape lectures	-1.151	7	.870
Allowed a student to miss a class because of a problem related to his/her disability	-.693	17	.336
Referred a student to professional help	-.494	24	.202
Consulted with the university counseling center, student health center mental health department, or the disability services center about an issue	.416	8	.294
Allowed a student to get a copy of another student's notes or arrange for a note taker in your class	.284	7	.215
Discussed the problem with the student	.020	24	.008

* $p < .05$.*Note.* N=50. Only faculty whose STEM/Non-STEM status was known were included.

types of courses in which they made accommodations (e.g. lab, discussion, lecture, seminar or practicum). A possible explanation for the dissimilarity in the types of accommodations made by faculty is that appropriate means of assessing student learning depend on the type of course. Becker et al. (2002) reported that faculty in health sciences made fewer accommodations for students with psychiatric disabilities than faculty in other fields. Faculty in health sciences were not included in the comparison analyses for this study because this college within the university was comprised of departments in both STEM and non-STEM disciplines (e.g. speech and hearing sciences, leisure studies, community health and kinesiology).

Effectiveness of Strategies Used by Engineering and Non-STEM Faculty

The one accommodation rated more effective by engineering faculty was *gave a student extra time to complete an exam*. More detailed data on the types of exams given by faculty would be helpful in interpreting this result. It is possible that extra time is more effective for problem-solving exams than for essay exams.

Limitations

Generalizing the findings of this study to all faculty at the university studied and other universities should be done with caution due to the lack of proportional representation of colleges and cultural backgrounds in the sample. In addition, the return rate of the study was low, which further limits generalizability.

Another limitation is that faculty were asked for the college of their primary appointment within the university, making it impossible to determine whether or not some faculty were in STEM fields or not. For example, the College of Liberal Arts and Sciences includes departments such as East Asian Languages and Cultures as well as Physics and Biology. Asking faculty for their college rather than specific department was done in the interest of ensuring the anonymity of faculty in small departments who could be identified by their demographic information.

No definition of psychiatric disability was provided in an effort to not limit the variety of individuals that faculty included in this category. Including a brief paragraph in the cover letter explaining why a definition, or specific diagnosis, was purposefully not given may have provided faculty with a better rationale for responding to the questions.

A positive response bias may have affected the results of this study. It is possible that faculty with more positive perceptions of students with mental health problems were more likely to respond to the survey. Response bias may not have influenced the data, though. According to Weisberg, Krosnick, and Bowen (1996), participants in mail surveys, who can complete questionnaires in private, tend to give more candid responses than participants in telephone or face-to-face surveys.

Implications for Practice

The effectiveness of an accommodation or strategy may vary depending on the subject matter of the course and the type of course, not to mention the numerous different characteristics of individual students and faculty members. Although allowing a student to miss class was rated as an ineffective strategy, we cannot know what the outcome would have been if the student went to class on a highly symptomatic day. The negative social and academic consequences of embarrassing behavior may be worse than those of simply missing class. As professionals, we can work with students to plan ahead for potential absences by arranging for a friend to record the lecture, getting phone numbers of friends in class early in the semester, and e-mailing the professor before the missed class if possible. Also, be creative in developing alternatives to missing class with a student. Taking extra breaks during class and changing one's seat may enable a student to attend a class on a day that he or she previously would have skipped.

We can talk with students about whether or not they want to use accommodations for each class individually. A student whose disability warrants extra time on exams may choose to use that extra time in STEM courses and not use it in social science courses. We can empower students by teaching them to attend to what strategies and accommodations work for them and what ones do not in a variety of situations.

Future Research

Factors that may predict faculty accommodation of students with psychiatric disabilities should also be explored. Examples of potential factors include (a) the number of students a faculty member instructs per semester, (b) the amount of time faculty spend arranging strategies for their students with psychiatric disabilities, (c) students' behavior when requesting strategies, and (d) whether the professor or the student initiated the strategy.

The development of training materials and resources for faculty should be investigated. Most faculty in this study were interested in resources, and most had taught students with psychiatric disabilities. Therefore, any training materials or resources provided to faculty need to be validated through research prior to dissemination. A more in-depth evaluation of strategy usage and effectiveness, including supporting evidence based on student grades, would also provide a valuable contribution to the development of resource materials.

References

- Bourke, A. B., Strehorn, K. C., & Silver, P. (2000). Faculty members' provision of instructional accommodations to students with LD. *Journal of Learning Disabilities, 33*, 26-32.
- Brockelman, K. F., Chadsey, J. G., & Loeb, J. (2006). Faculty Perceptions of University Students with Psychiatric Disabilities. *Psychiatric Rehabilitation Journal, 30*, 23-30.
- Becker, M., Martin, L., Wajeeh, E., Ward, J., & Shern, D. (2002). Students with mental illnesses in a university setting: Faculty and students attitudes, beliefs, knowledge, and experiences. *Psychiatric Rehabilitation Journal, 25*, 359-368.
- Collins, M., & Mowbray, C. (2005). Higher education and psychiatric disabilities: National survey of campus disability services. *American Journal of Orthopsychiatry, 75*, 304-315.
- Cook, J. A., Yamaguchi, J., & Solomon, M. L. (1993). Field-testing a postsecondary faculty in-service training for working with students who have psychiatric disabilities. *Psychosocial Rehabilitation Journal, 17*, 157-169.
- GlenMaye, L., & Bolin, B., (2007). Students with psychiatric disabilities: An exploratory study of program practices. *Journal of Social Work Education, 43*(1), 117-131.
- Megivern, D., Pellerito, S., & Mowbray, C. (2003). Barriers to higher education for individuals with psychiatric disabilities. *Psychiatric Rehabilitation Journal, 26*, 217-231.
- Olney, M. F., & Brockelman, K. F. (2003). Out of the disability closet: Strategic use of perception management by university students with disabilities. *Disability & Society, 18*, 35-50.
- Rickerson, N., Sourma, A., & Burgstahler, S. (2004). Psychiatric disabilities in postsecondary education: Universal design, accommodations and supported education. *National capacity building institute on issues of transition and postsecondary participation for individuals with hidden disabilities*. Waikiki, HI. Retrieved August 21, 2005 from http://www.ncset.hawaii.edu/institutes/mar2004/papers/pdf/Souma_revised.pdf
- Sharpe, M. N, Bruinininks, B. D., Blacklock, B. A., Benson, B., & Johnson, D. M. (2004, March). The emergence of psychiatric disabilities in postsecondary education. *National capacity building institute on issues of transition and postsecondary participation for individuals with hidden disabilities*. Honolulu, Hawai'i. Retrieved August 21, 2005 from http://www.ncset.hawaii.edu/institutes/mar2004/papers/pdf/Sharpe_revised.pdf
- Szymanski, E. M., Hewitt, G. J., Watson, E. A., & Swett, E. A. (1999). Faculty and instructor perception of disability support services and student communication. *Journal of Postsecondary Education, 22*, 117-128.
- Vasek, D. (2005). Assessing the knowledge base of faculty at a private, four-year institution. *College Student Journal, 38*(2), 307-315.
- Weiner, E., & Weiner, J. (1996). Concerns and needs of students with psychiatric disabilities. *Journal of Postsecondary Education and Disability, 12*, 2-9.
- Weisberg, H. F., Krosnick, J. A., & Bowen, B. D. (1996). *An introduction to survey research, polling, and data analysis* (34th ed). Thousand Oaks, CA: Sage Publications, Inc.

About the Author

Karin Brockelman earned her Ph.D. in Special Education at the University of Illinois at Urbana-Champaign. She earned her M.S. in Rehabilitation from the University of Illinois at Urbana-Champaign as well and is a Certified Rehabilitation Counselor. Dr. Brockelman is currently a postdoctoral fellow in the Department of Psychiatric Rehabilitation and Counseling Professions at the University of Medicine & Dentistry of New Jersey. She can be reached by email at: brockeka@umdj.edu and brockelm@illinoisalumni.org

Acknowledgments: The information contained in this publication is based upon work supported by NSF under Grant No. 0533197 and by NIDRR under Grant No. H133P050006. Any opinions, findings, and conclusions or recommendations expressed in this material are those of the author(s) and do not necessarily reflect the views of NSF or NIDRR.